

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
<b>FEES DETERMINATION</b>	M M		03-121-01
<b>O.I.P.E. CLASSIFIER</b>		16	01
<b>FORMALITY REVIEW</b>	S.H	1085	5/31/01
<b>RESPONSE FORMALITY REVIEW</b>	ZM	927	09/20/01

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date	
Final	Original	
1	4/8/01	
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Claim	Date	
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If more than 150 claims or 10 actions  
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